

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

ADDRESS (number and street) ▼

555 Capitol Mall, Suite 1425

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00285593

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2014

through

M M M / D D D / Y Y Y Y Y Y
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Louis Medina

Signature of Treasurer

Louis Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Report Covering the Period: From: M M / D D / Y Y Y Y Y 09 / 01 / 2014 To: M M / D D / Y Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		2140121.70
(b) Cash on Hand at Beginning of Reporting Period.....	1835286.39	
(c) Total Receipts (from Line 19)	0.00	227164.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1835286.39	2367286.39
7. Total Disbursements (from Line 31)	381720.00	913720.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1453566.39	1453566.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Report Covering the Period:

From:

M M / D D / Y Y Y Y
09 01 2014

To:

M M / D D / Y Y Y Y
09 30 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

226932.34

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

0.00

226932.34

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

0.00

226932.34

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

232.35

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

0.00

227164.69

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

0.00

227164.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	12500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	376720.00	901220.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	381720.00	913720.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	381720.00	913720.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	226932.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	226932.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Democratic Party of New Mexico

Mailing Address 8214 2nd Street, NW, Suite A

City	State	Zip Code
Albuquerque	NM	87114

Purpose of Disbursement
Contribution

011

Candidate Name

Democratic Party of New MexicoCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2014

Transaction ID : EXPB46

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Allen for Senate 2014, Ben

Mailing Address 3700 Wilshire Blvd., #1050-B

City	State	Zip Code
Los Angeles	CA	90010

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Allen for Senate 2014, Ben

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2014

Transaction ID : EXPB73

Amount of Each Disbursement this Period

4100.00

Full Name (Last, First, Middle Initial)

B. Archuleta for State Representative, Philip

Mailing Address 2055 Briarwood Lane

City	State	Zip Code
Las Cruces	NM	88005

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Archuleta for State Representative, Philip

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

Transaction ID : EXPB50

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Arizona Democratic Party

Mailing Address 2910 North Central Avenue

City	State	Zip Code
Phoenix	AZ	85012

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Arizona Democratic Party

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2014

Transaction ID : EXPB72

Amount of Each Disbursement this Period

65000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

71600.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Committee to Elect Bobby Shriver Supervisor 2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 515 South Figueroa Street, Suite 1

City	State	Zip Code
Los Angeles	CA	90071

Transaction ID : EXPB40Purpose of Disbursement
Contribution to Non-Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

Committee to Elect Bobby Shriver Supervisor 2014Category/
Type

100000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Democratic Party of Orange County

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Mailing Address 3700 Wilshire Blvd., Suite 1050B

City	State	Zip Code
Los Angeles	CA	90010

Transaction ID : EXPB60Purpose of Disbursement
Contribution to Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

Democratic Party of Orange CountyCategory/
Type

2500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. DLCC New Mexico Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 1401 K Street, NW, Suite 201

City	State	Zip Code
Washington	DC	20005

Transaction ID : EXPB45Purpose of Disbursement
Contribution to Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

DLCC New Mexico CommitteeCategory/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Eichenberg for State Treasurer, Tim

Mailing Address 7800 Charger Trail, NE

City	State	Zip Code
Albuquerque	NM	87109

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Eichenberg for State Treasurer, TimOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB57

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Felicia for Arizona 2014

Mailing Address P.O. Box 80025

City	State	Zip Code
Phoenix	AZ	85060

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Felicia for Arizona 2014Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : EXPB70

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Forward New Mexico

Mailing Address 1206 Las Lomas Road, NE

City	State	Zip Code
Albuquerque	NM	87106

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Forward New MexicoOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB42

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Fred for Arizona

Mailing Address P.O. Box 13353

City	State	Zip Code
Phoenix	AZ	85002

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Fred for ArizonaOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : EXPB71

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Friends of Oscar de la Torre

Mailing Address 2037 1/2 Steward Street

City	State	Zip Code
Santa Monica	CA	90504

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Friends of Oscar de la TorreOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : EXPB64

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Garcia 2014

Mailing Address P.O. Box 7243

City	State	Zip Code
Phoenix	AZ	85011

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Garcia 2014Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : EXPB69

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Gonzales for State Representative , Roberto 'Bobby'

Mailing Address 26 Lavender Lane

City	State	Zip Code
Ranchos De Taos	NM	87557

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Gonzales for State Representative , Roberto 'Bobby'

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB49

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Gray's Ballot Measure Committee , Valley Solutions: Assemblymember Adam

Mailing Address 9321 Silverbend Lake

City	State	Zip Code
Elk Grove	CA	95624

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Gray's Ballot Measure Committee , Valley Solutions: Assemblymember Adam

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : EXPB68

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Jones for Public Regulation Commissioner , Sandy

Mailing Address HCR Box 155

City	State	Zip Code
Williamsburg	NM	87942

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Jones for Public Regulation Commissioner , Sandy

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB59

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

12000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Kane for State Representative, Emily

Mailing Address 9817 Riverside Road, NW

City	State	Zip Code
Albuquerque	NM	87114

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Kane for State Representative, Emily

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB53

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Keller for State Auditor , Tim

Mailing Address 11023 Vistazo Place, SE

City	State	Zip Code
Albuquerque	NM	87123

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Keller for State Auditor , Tim

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB55

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. King for Governor of New Mexico , Gary

Mailing Address P.O. Box 40

City	State	Zip Code
Moriarty	NM	87035

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

King for Governor of New Mexico , Gary

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB54

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11500.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Labrado for Rancho Santiago College Board 2014

Mailing Address 722 West Chapman Avenue, Suite E

City	State	Zip Code
Orange	CA	92868

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Larry Labrado

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : EXPB62

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Loya for Trustee 2014

Mailing Address 2037 1/2 Steward Street

City	State	Zip Code
Santa Monica	CA	90504

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Loya for Trustee 2014

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : EXPB65

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. New Mexico House Majority Fund

Mailing Address 1016 Richmond Drive, NW

City	State	Zip Code
Albuquerque	NM	87106

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

New Mexico House Majority Fund

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

Transaction ID : EXPB44

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4250.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. O'Connor for City Council 2014, Mayor Pam

Mailing Address 3700 Wilshire Blvd., Suite 1050B

City	State	Zip Code
Los Angeles	CA	90010

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

O'Connor for City Council 2014, Mayor Pam

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : EXPB63

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. Patriot Majority New Mexico

Mailing Address P.O. Box 35522

City	State	Zip Code
Washington	DC	20033

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Patriot Majority New Mexico

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB43

Amount of Each Disbursement this Period

50000.00

Full Name (Last, First, Middle Initial)

C. Powell for Commissioner of Public Lands, Ray

Mailing Address 805 Pueblo Solano, NW

City	State	Zip Code
Albuquerque	NM	87107

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Powell for Commissioner of Public Lands, Ray

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB58

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50825.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Rivera for City Council 2014

Mailing Address 1787 Tribute Road, Suite K

City	State	Zip Code
Sacramento	CA	95815

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

Rivera for City Council 2014

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : EXPB61

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. San Juan County Democratic Party

Mailing Address P.O. Box 173

City	State	Zip Code
Farmington	NM	87499

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

San Juan County Democratic Party

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

Transaction ID : EXPB47

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. San Luis Obispo County Democratic Central Committee

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement
Contribution to Non Federal Committee

Candidate Name

San Luis Obispo County Democratic Central Committee

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2014

Transaction ID : EXPB66

Amount of Each Disbursement this Period

25000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26800.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Santa Barbara County Democratic Central Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Transaction ID : EXPB67Purpose of Disbursement
Contribution to Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

Santa Barbara County Democratic Central Committee

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

25000.00

Full Name (Last, First, Middle Initial)

B. Smith de Cherif for State Representative , Teresa

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address P.O. Box 326

City	State	Zip Code
Tome	NM	87060

Transaction ID : EXPB52Purpose of Disbursement
Contribution to Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

Smith de Cherif for State Representative , Teresa

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

1000.00

Full Name (Last, First, Middle Initial)

C. Stapleton for State Representative , Sheryl Williams

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 4616 Crest, SE

City	State	Zip Code
Albuquerque	NM	87108

Transaction ID : EXPB51Purpose of Disbursement
Contribution to Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name

Stapleton for State Representative , Sheryl Williams

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Todacheen for State Representative , Harrison

Mailing Address P.O. Box 540

City	State	Zip Code
Shiprock	NM	87420

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Todacheen for State Representative , Harrison

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB48

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. Toulouse Oliver for Secretary of State, Maggie

Mailing Address P.O. Box 3071

City	State	Zip Code
Albuquerque	NM	87190

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Toulouse Oliver for Secretary of State, Maggie

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB56

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Wolf PAC

Mailing Address P.O. Box 7307

City	State	Zip Code
Albuquerque	NM	87194

Purpose of Disbursement
Contribution to Non Federal Committee

011

Candidate Name

Wolf PAC

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : EXPB41

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6700.00

--

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 18

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southwest Regional Council of Carpenters Legislative Improvement Cmte United Brotherhood of Carpenters & Joiners of America

Full Name (Last, First, Middle Initial)

A. Yes on Props 1 and 2 a bipartisan coalition of business labor Republicans Democrats and Go

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Mailing Address 2355 Broadway, #407

City State Zip Code
Oakland CA 94612

Transaction ID : EXPB38

Purpose of Disbursement
Contribution Non Federal Committee

011

Amount of Each Disbursement this Period

Candidate Name
Yes on Props 1 and 2 a bipartisan coalition of business labor Republicans Democrats and Go

Category/
Type

50000.00

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

50000.00

TOTAL This Period (last page this line number only)..... ►

376675.00